

**MINUTES**  
**CENTRAL REGIONAL TRAUMA COORDINATING COMMITTEE**  
**DECEMBER 15, 2008**  
**MERCED COUNTY PUBLIC HEALTH DEPARTMENT**  
**11:00 A.M.**

**MEMBERS PRESENT:**

Jim Davis, M.D.	Community Regional Medical Center, Fresno
Lynn Bennink, R.N.	Community Regional Medical Center, Fresno
Tony Tam, M.D.	Memorial Medical Center, Modesto
Chuck Baucom	Merced County EMS Agency
Linda Diaz, R.N.	Merced County EMS Agency
Johnathan Jones, R.N.	EMS Authority
Debbie Becker, R.N.	Central California EMS Agency
Steve Andriese	Mountain Valley EMS Agency
Peggy Raymer, R.N.	Memorial Medical Center
Sharon Perry, R.N.	Memorial Medical Center
Clarence Teem	Tuolumne County EMS Agency
Paula Isbell	Kern County EMS Agency

I. Introductions / Call to Order

The meeting was called to order by Jim Davis at 11:15 a.m.

II. Approval of Minutes

The minutes from October 20, 2008 were approved.

III. Additions to the Agenda

The following items were added to the agenda under New Business – Tele Health Medicine, Rural Trauma Course, Additional Trauma Centers

IV. Old Business

A. Brown Act

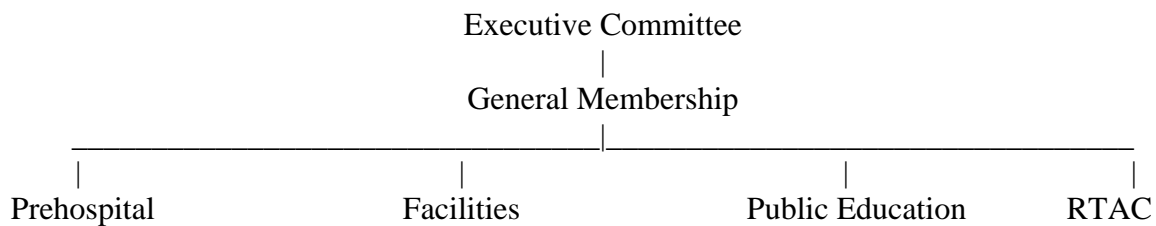
Johnathan reported that this committee does not fall under the requirements of the Brown Act.

B. Bylaws

The committee reviewed and discussed Draft 2 of the bylaws. The discussion included the following:

1. Responsibilities and voting procedures for the general membership vs the executive membership. It was agreed we still need to develop the details of both and what their responsibilities will be. These will be addressed in the next draft of the bylaws.

2. The membership of the executive committee and whether to add a representative from a ground transport agency and an air transport agency. It was agreed to leave the membership as is, EMS is represented by the EMS Administrator and Medical Director from each Local EMS Agency. It was also discussed and agreed to look into adding an Adhoc member to the executive committee and this would be a member from another RTCC.
3. The executive committee would develop the bylaws and vote on the approval of the bylaws and officers. The bylaws will discuss the process to establish subcommittees and/or task forces. The subcommittees or task forces will be decided on by the executive committee. The general membership would vote on which members to elect to the subcommittees.
4. All tasks, recommendations or ideas to be assigned to the subcommittees will be decided by the executive committee. Recommendations can be sent to the executive committee by the general membership, they will be reviewed and assigned to a subcommittee by the executive committee. General membership could send requests directly to the executive committee or direct them through their Local EMS Agency. All direction to the subcommittees will come from the executive committee. Below is an example of the organization of the CRTCC.



5. Topics for the agenda of an upcoming meeting will be sent out to the officers of the executive committee. Topics will be reviewed by the officers prior to the meeting and vote on which topics will be placed on the agenda, would be approved with a majority vote.
6. Frequency of meetings. The executive committee for now will continue to meet every other month, with a conference call in the month following the meeting if needed. General membership meetings, twice a year and hold them in conjunction with a CME program. Regional trauma audit committee to meet quarterly or biannually and their meetings will be held at one of the trauma centers in our region.

Chuck Baucom will take the comments from the meeting and revise current draft and send the next draft out to committee members. Any comments will be emailed to Chuck, and the next revision will be discussed on the conference call January 15<sup>th</sup>.

V. New Business

A. Rural Trauma Course

Jim Davis is planning on taking the instructor course in Phoenix. He would like to see the course offered here. He will bring more information back to the next meeting.

B. Additional Trauma Centers

Jim gave the committee an update on the progress of Kaweah Delta Medical Center in Visalia becoming a Level III trauma center. They are still in the early stages. The committee agreed it would be important to help hospitals who are working on becoming trauma centers to develop their policies and protocols.

C. Telehealth

Lynn passed out an email she received from the California HealthCare Foundation on the establishment of the California Center for Connected Health. This is a plan to coordinate telehealth adoption throughout the state. Telehealth would connect patients, provider groups, rural hospitals with medical providers and educators to overcome the barriers of distance and help deliver health services and education in areas that lack those resources.

Chuck thought UC Merced may have grant money for this. Chuck will get information and send to Lynn.

Debbie will forward this email to the committee.

D. Intensive Care Services for the Pediatric Trauma Patient

Lynn discussed this document which was developed by EMSA and the EMS for Children Technical Advisory Committee. It is out for public comment from December 15<sup>th</sup> to January 28<sup>th</sup>. This document recommends that all pediatric trauma patients requiring intensive care unit care should receive inpatient care in a Level I or II pediatric trauma center or a Level I or II trauma center with a California Children's Services approved PICU. Local EMS Agencies should work with trauma centers to develop guidelines for triage and transfer of pediatric trauma patients based on available resources.

Debbie will email this document to the committee for review. The committee will discuss this document on our conference call. Send any comments to Jim. Jim will talk with Children's Hospital to get their comments.

VI. Conference Call and Next Meeting

- A. Conference call Thursday, January 15, 2009 from 3:00-5:00. Johnathan will set up the conference call and send out the number and code to call in with.
- B. Next meeting – February 16, 2009 in Fresno. Lynn and Debbie will find a meeting room.
- C. Agenda for meetings
  - 1. Conference Call:
    - a. Bylaws – will discuss next draft. Finalize at the February meeting
    - b. Intensive Care Services for the Pediatric Trauma Patient
  - 2. February Meeting
    - a. Finalize Bylaws
    - b. Update on Rural Trauma Course
    - c. Ideas for the dates and educational program for the General Membership meeting.

The meeting was adjourned at 1:30 PM